PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2001

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10044493

CLAIMS AS FILED - PART I (Column 1)					(Column 2) SMALL ENTITY				OR	OTHER THAN OR SMALL ENTITY		
ТО	TAL CLAIMS		19					RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS 19 minus 20=					* ć	9		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	, mir	nus 3 =	* 0			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter						olumn 2	•	TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART (Column 1) (Column						(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	·][Minus	** 2	20	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 2	Minus	***	3	-	X42=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	IT CLAIM			+140=		OR	+280=	
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3)							ADDII. FEE		-		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. //	Minus	** (20	=		X\$ 9=		OR	X\$18=	
AME	Independent	* 2 NTATION OF M	Minus	***	ろ IT CLAIM	=		X42=		OR	X84=	
	Tring i Phese	MIATION OF M	OLITE DE	- CINDEIN	T CLAHVI		1	+140=		OR	+280=	1
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)	_					
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***] <u>-</u>		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDEN	NT CLAIM]			1	.000	
	If the entry in colu	ımn 1 is less than	the entry in col	umn 2. wri	ite "0" in co	olumn 3.		+140= TOTAL		OR	+280= TOTAL	
-	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

10/044493

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
Γ_,	TAL OLABAG		(Column 1)		(Column 2)		T	TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR			NUMBER	FILED	NUMBER EXTRA		В	ASIC FEE	\$375	OR	BASIC FEE	\$750	
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=		
INC	EPENDENT CL	_AIMS	minus 3 =					X42=		OR	X84=		
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=		
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	L	TOTAL		OR	TOTAL		
	1 ./\c C	LAIMS'AS A	MENDED	- PΔR	T II			•			OTHER	THAN	
	AndtCae	(Column 1)		(Colur	nn 2)	(Column 3)	SMALL ENTITY			OR	OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=.		X\$ 9=		OR	X\$18=		
	Independent	* NTATION OF MI	Miņus	***	CLAIM	=		X42=		OR	X84=		
<u></u>	rinoi rhese	NIATION OF MI	JETIPLE DEF	PINDENT	CLAIM			+140=		OR	+280=		
							<u></u>	TOTAL		OR	TOTAL		
		(Column 1)		(Colun	on 3)	(Column 3)	AD	DIT. FEE		,	ADDIT, FEE		
		CLAIMS		HIGH		(Column 3)			ADDI			4551	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	*** .		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM					•••			
						•	Ľ	140=		OR	+280=		
·			·				ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	· .	
		(Column 1)	•	(Colun		(Column 3)					•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	>	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus -	***		=		X42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		1			υn			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								·	OR	+280=		
**	If the "Highest Nu	mber Previously Pa	id For IN THIS	S SPACE is	less that	20, enter "20."	ADI	TOTAL DIT. FEE		OR ,	TOTAL ADDIT. FEE		
***	If the "Highest Nu	mber Previously Pa	aid For" IN THE	S SPACE is	less that	n 3, enter "3."				•	ADDIT. F.E.E.		